



Work Order (Bid Form)

Auditor: Scott Haislip (615) 274-2565 or (615) 424-2565

WORK ORDER INFORMATION

Work Order Name: WO/10010MC1923/1

Work Order Type: Weatherization

Audit Name: 10010MC1923

CLIENT INFORMATION

Client Name:

Address:

Client ID: 10010MC1923

MURFREESBORO, TN 37129

Alt. Client ID:

AGENCY INFORMATION

Agency: Mid-Cumberland Community Action Agency

Agency Phone: (615) 742-1113

Address: P.O.Box 310, 233 Legend Drive, Suite 103
Lebanon, TN 37088-0310

Fax:

Email Address:

Company Name & License Number: _____

Contractor's Signature: _____

COMMENT

SITE BUILT 1940
1092 SQ FT
DOG & CAT IN HOUSE
INSECT PROBLEM
LEAD BASE PAINT IS LIKELY

Client Name:

Client ID: 10010MC1923

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Work Order (Bid Form)

Work Order Name: WO/10010MC1923/1

Report Run On: 5/17/2010

DOE Weatherization Assistant

Version 8.6.0

Page 1 of 13

Measures

Measure 1 INSTALL 2 SMOKE ALARMS				Components			Inspected					
Comment				<input type="text"/>								
				Estimated			Actual					
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total			
	Health and Safety	2 SMOKE ALARMS	Each	2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Other Detail												
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>			
Field Notes:												

Measure 2 INSTALL 6 MIL VAPOR BARRIER				Components			Inspected					
Comment 756 SQ FT; CONTRACTOR TO VERIFY				<input type="text"/>								
				Estimated			Actual					
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total			
	Health and Safety	6 MIL VAPOR BARRIER	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Other Detail												
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>			
Field Notes:												

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Work Order (Bid Form)

Work Order Name: WO/10010MC1923/1

Report Run On: 5/17/2010

DOE Weatherization Assistant

Version 8.6.0

Page 2 of 13

Measure 3 INSTALL POP OFF VALVE DRAIN LINE
TO WATER HEATER**Components****Inspected****Comment**☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Health and Safety	POP OFF DRAIN LINE	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>

Field Notes:**Measure 4** SEAL PLUMBING PENETRATIONS
UNDER KITCHEN SINK**Components****Inspected****Comment**☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Other	AIR SEALING	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>

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Work Order (Bid Form)

Work Order Name: WO/10010MC1923/1

Report Run On: 5/17/2010

DOE Weatherization Assistant

Version 8.6.0

Page 3 of 13

**Measure 5 SEAL PLUMBING PENETRATIONS
UNDER BATHROOM SINK & COMMODE
SUPPLY LINE**

Components

Inspected

Comment

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Other	AIR SEALING	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>
						<input type="text"/>			<input type="text"/>

Field Notes:

**Measure 6 WEATHER STRIP FRONT & BACK
DOOR**

Components

Inspected

Comment

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Doors	WEATHER STRIP	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>
						<input type="text"/>			<input type="text"/>

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Alt. Client ID:

Work Order (Bid Form)
Work Order Name: WO/10010MC1923/1
Report Run On: 5/17/2010

DOE Weatherization Assistant
Version 8.6.0
Page 4 of 13

Measure 7 ADD DOOR SWEEP TO FRONT & BACK DOOR**Components****Inspected****Comment**☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Doors	DOOR SWEEP	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>

Field Notes:**Measure 8 SEAL ALONG TUB & FLOOR IN BATHROOM & FLOOR & WALL BESIDE TUB****Components****Inspected****Comment**☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Other	AIR SEALING	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>

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Work Order (Bid Form)

Work Order Name: WO/10010MC1923/1

Report Run On: 5/17/2010

DOE Weatherization Assistant

Version 8.6.0

Page 5 of 13

Measure 9 SEAL AROUND WOOD PLATE ON WALL WHERE HEATER WAS IN BEDROOM

Components

Inspected

Comment

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Other	AIR SEALING	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>
						<input type="text"/>			<input type="text"/>

Field Notes:

Measure 10 INCREASE ATTIC INSULATION TO R-38; APPROXIMATELY 8" PRESENT

Components

Inspected

Comment 360 SQ FT; CONTRACTOR TO VERIFY

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
10	Unspecified	ATTIC INSULATION	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>

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Work Order (Bid Form)

Work Order Name: WO/10010MC1923/1

Report Run On: 5/17/2010

DOE Weatherization Assistant

Version 8.6.0

Page 6 of 13

Measure 11 Floor Ins. R-19**Components** F1**Inspected****Comment** 756 SQ FT; CONTRACTOR TO VERIFY☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Insulation	Floor Insulation - Fiberglass Batts - R-19	SqFt	756					

Other Detail

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Measure Sub Total: **Sub Total:** **Field Notes:****Measure 12 REPLACE BROKEN PANE IN WN-8-W****Components****Inspected****Comment** 10" X 10"; CONTRACTOR TO VERIFY
FRONT OF HOUSE☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Windows	PANE	Each	1					

Other Detail

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Measure Sub Total: **Sub Total:** **Field Notes:**

Client Name:

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Work Order (Bid Form)

Work Order Name: WO/10010MC1923/1

Report Run On: 5/17/2010

DOE Weatherization Assistant

Version 8.6.0

Page 7 of 13

Measure 13 REPLACE MISSING PANE IN WN-6-E**Components****Inspected****Comment** 8" X 10"; CONTRACTOR TO VERIFY
BACK OF HOUSE☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Windows	PANE	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>

Field Notes:**Measure 14 GLAZE WINDOW WN-1-W****Components****Inspected****Comment** 32" X 55.5"; CONTRACTOR TO VERIFY☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Windows	WINDOW GLAZING	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>

Field Notes:

Client Name:

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Work Order (Bid Form)

Work Order Name: WO/10010MC1923/1

Report Run On: 5/17/2010

DOE Weatherization Assistant

Version 8.6.0

Page 8 of 13

Measure 15 INSTALL SCREEN TO STORM DOOR
ON LEFT SIDE OF HOUSE**Components****Inspected****Comment** 32" X 30"; CONTRACTOR TO VERIFY☐

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
	Doors	SCREEN	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		

Field Notes:**Measure 16** Storm Windows**Components** WN-8-W**Inspected****Comment** 56" X 49"; CONTRACTOR TO VERIFY☐

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Windows	Storm Window	SqFt	19.06	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Storm Window	SqFt	19.06	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	Other	Storm Window	Each Window	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		

Field Notes:

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Work Order (Bid Form)
Work Order Name: WO/10010MC1923/1
Report Run On: 5/17/2010

DOE Weatherization Assistant
Version 8.6.0
Page 9 of 13

Measure 17 MASTIC SEAL DUCT SYSTEM & RETURN; PAN READING 15-31**Components****Inspected****Comment**☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Heating Equipmen	MASTIC SEAL	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>

Field Notes:**Measure 18 INSTALL AIR FILTER & LEAVE 5 FOR HOMEOWNER****Components****Inspected****Comment** 12" X 30"; CONTRACTOR TO VERIFY☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Heating Equipmen	AIR FILTERS	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>

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Work Order Name: WO/10010MC1923/1

Report Run On: 5/17/2010

DOE Weatherization Assistant

Version 8.6.0

Page 10 of 13

Measure 19 SEAL HOLES IN SUPPLY LINES IN CRAWLSPACE**Components****Inspected****Comment**☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Other	AIR SEALING	Each	1					

Other Detail

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Measure Sub Total:**Sub Total:****Field Notes:****Measure 20 DWH Pipe Insulation****Components****Inspected****Comment**☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Insulation	DHW Pipe Insulation	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	DHW Pipe Insulation	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Other Detail

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Measure Sub Total:**Sub Total:****Field Notes:**

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Report Run On: 5/17/2010

DOE Weatherization Assistant

Version 8.6.0

Page 11 of 13

Measure 21 DWH Tank Insulation				Components				Inspected	
Comment									
				Estimated		Actual			
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Hot Water Equipm	DHW Tank Insulation	Each	1					
2	Labor	DHW Tank Insulation	Each	1					
Other Detail									
Measure Sub Total:							Sub Total:		
Field Notes:									

Measure 22 INSTALL FLOOR TO KITCHEN CABINET UNDER SINK				Components				Inspected	
Comment 24" X 30"; CONTRACTOR TO VERIFY									
				Estimated		Actual			
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Other	OTHER	Each	1					
Other Detail									
Measure Sub Total:							Sub Total:		
Field Notes:									

**Measure 23 REPAIR WALL ALONG BACK OF BATH
TUB**

Components

Inspected

Comment

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
	Other	OTHER	Each	1					

Other Detail

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Measure Sub Total:

Sub Total:

Field Notes:

Work Order Grand Total:

Grand Total:

Client Name:

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Alt. Client ID:

Work Order (Bid Form)

Work Order Name: WO/10010MC1923/1

Report Run On: 5/17/2010

DOE Weatherization Assistant

Version 8.6.0

Page 13 of 13